

BROOKLYN DEVELOPMENTAL SERVICES	Date Issued	Page	Topic No.
	1/2004	1 of 3	3.1.11
	Chapter:		
POLICY AND PROCEDURE MANUAL	CONSUMER PROTECTION		
	Subject:		
Source References:	Topic:		
SPECIAL OBSERVATION			
<u>PURPOSE:</u>			
Special Observation provides a heightened level of supervision for consumers who present a danger to the physical well being of themselves or others.			
<u>DEFINITION:</u>			
There are 2 categories of Special Observation which may be provided to consumers.			
<p>a. <u>One to One Supervision</u> - Assignment of one staff to supervise a consumer for a designated period of time (i.e., time of the day or program activity shift). This kind of supervision requires that assigned staff is within arms length and maintains visual contact (including the bathroom - privacy issues do not apply) for the duration of the assignment. If the consumer presents with severe assaultiveness because of the staff's proximity, a safe distance can be maintained during the agitation period of no more than three (3) feet and advises supervisor of problems. The consumer's status is reviewed for necessary modifications to 1:1 status. One to One supervision is required exclusively for consumers who present significant danger to the physical well being of themselves or others. Examples include but are not limited to suicidal ideation or behavior, extreme aggression or critical medical conditions.</p> <p>b. <u>Close Observation</u> - Assignment of staff to consumers in a manner which varies by physical proximity, visual contact and length of time. The ITT will define the parameters of the supervision to be provided in a manner which meets the needs of the consumer. This level of supervision will be utilized for a range of problems/situations that vary in the level of danger or threat posed to the consumer or others. Examples include but are not limited to elopement, aggression and self injury.</p>			
<u>RESPONSIBILITY:</u>		<u>PROCEDURE:</u>	
Any Staff		Observes and reports consumer with dangerous behavior/situation to senior unit administrator and/or medical staff on duty.	

APPROVED

Peter H. H. H.

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<table border="0"> <tr> <td style="vertical-align: top;"> <u>RESPONSIBILITY:</u>   Administrator/Medical Staff           Core Supervisor        Assigned Staff </td> <td style="vertical-align: top;"> <u>PROCEDURE:</u>   1. Evaluates behavior/situation and determines the level of supervision that is required to ensure the safety of the consumer and others.   2. Provides written rationale for need of 1:1 and projection of how long 1:1 is required. Develops written plan to reduce/remove 1:1 supervision.   3. Notifies Core Supervisor to assign staff as required.   4. Notifies the Deputy Director on working days and Clinical Control of the need to adjust the allocation of staff to the unit.   1. Assigns staff to provide the level of supervision that was determined to be required.   2. Instructs assigned staff with regards to the level of supervision, reporting and documentation that is required.   1. Maintains arms length supervision of assigned consumer.   2. Documents consumer's activities every 15 minutes in 1:1 log.   3. If staff needs to leave his/her consumer, (i.e., bathroom, urgency) insures that another staff covers the assigned consumer and documents such in 1:1 log or in an emergency, takes the consumer with him/her to the nearest phone to call for assistance. </td> </tr> </table>				<u>RESPONSIBILITY:</u>  Administrator/Medical Staff          Core Supervisor       Assigned Staff	<u>PROCEDURE:</u>  1. Evaluates behavior/situation and determines the level of supervision that is required to ensure the safety of the consumer and others.  2. Provides written rationale for need of 1:1 and projection of how long 1:1 is required. Develops written plan to reduce/remove 1:1 supervision.  3. Notifies Core Supervisor to assign staff as required.  4. Notifies the Deputy Director on working days and Clinical Control of the need to adjust the allocation of staff to the unit.  1. Assigns staff to provide the level of supervision that was determined to be required.  2. Instructs assigned staff with regards to the level of supervision, reporting and documentation that is required.  1. Maintains arms length supervision of assigned consumer.  2. Documents consumer's activities every 15 minutes in 1:1 log.  3. If staff needs to leave his/her consumer, (i.e., bathroom, urgency) insures that another staff covers the assigned consumer and documents such in 1:1 log or in an emergency, takes the consumer with him/her to the nearest phone to call for assistance.
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	Chapter: <b>PROVISION OF MEDICAL AND HEALTH SERVICES FOR CONSUMERS</b>		
	Subject: <b>MEDICAL SERVICES</b>		
Source References:	Topic: <b>REPORTING DEATHS</b>		

POLICY:

All death occurring under sudden or unexplained circumstances, or which are known or suspected of being due to casualties, violence or criminal neglect shall be immediately reported to the Office of Medical Examiner/Coroner. (Also see additional reporting requirements under Incident Reporting).

The following cases are to be reported.

- a) All accidental deaths, no matter what the nature of the injuries or whether the injuries were the direct or a contributory cause of death.
- b) All unattended deaths.
- c) All unexpected deaths in apparently healthy individuals where the circumstances are not clear.
- d) Deaths by suicide or suspicion of suicide.
- e) Deaths by homicide or suspicion of homicide.
- f) All deaths related to drugs.
- g) All deaths due to poisoning or suspected poisoning, including bacterial.
- h) All deaths which occur during or are related directly to any therapeutic , diagnostic or operative procedure.

<u>RESPONSIBILITY:</u>	<u>PROCEDURE:</u>
Residential Unit	<ol style="list-style-type: none"> <li>1. Contact Safety and Nurse on duty to secure body.</li> <li>2. Notify DDO or Clinical Control (Off-duty hours).</li> <li>3. Box all records and information on consumer and bring immediately to the Deputy Director of Operations.</li> </ol>